Effective January 1, 2003										W867654												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY											
TOTAL CLAIMS			75				FA	E	FEE		RATE	FEE										
FOR			NUMBER FILED		NUMBER EXTRA		BASE	FEE	375.00	OR	BASIC FEE	750.00										
TOTAL CHARGEABLE CLAIMS			(X minus 20=		. 8		XS	X\$ 9=		RO	X\$18=	144										
INDEPENDENT CLAIMS			7 minus 3 =		•		X4	X42=		OR	X84=	1.7										
MI	LTIPLE DEPEN	DENT CLAIM P	RESENT				1140=			OR	+280=											
• 11	the difference	in column 1 is	less than zero, enter "O" in column 2				101	_		OR	TOTAL	प्रप										
CLAIMS AS AMENDED - PART						(Column 3)	SMA	ar.	EXTITY	OR	OTHER											
ENTA		CLAIMS REMAINING APTER AMENOMENT		FIGH HAMI PREVIO PAID	EST BER WSLY	PRESENT EXTRA	RA	Œ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
AMENDMENT	Total	.28	Minus	9,	B,	. –	XS	9=		OR	X\$18=											
1	Independent	• 3	Minus	249	3	-	X4:)e		OR	X84=	·										
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								0=		OR	+280=	•										
								TAL PEE		OR	YOYAL ADOIT, FEE											
4	1-25-0							•														
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
ğ	Total .	.28	Minus	-2	8	-	- X8) o		OR	X\$18-	ن										
H	Independent	• 3	Minus		3	-/	X43			OB	1840											
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								J		OR	+280=											
								TAL FEE		ОЯ	TOTAL ADOIT, FEE											
8-17-04 (Column 1) (Column 2) (Column 3)																						
DIVENTO		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE										
	Total	. 28	Minus	-2	3	•	X\$ 8	,		OR	X\$18=											
AME	Independent • 3 Minus • • 3 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				CLAIM	<u>ام</u>	XX2	-		OR	XB4°											
								ï		OR	+280=											
 If the entry in column 1 is less than the entry in column 2, write "O" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." 							ADDIT.	TAL FEE		OR	TOTAL ADDIT, FEE											
The "Highest Number Previously Paid For" 64 THOS SPACE is less than 3, order "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.																						
FOR	PTD-475 (Res. 12	02) 118.0	ountenant Parano	Office: 2000-	499-00475	D13	Patent and 1		rank Office. U	8. DEF	FORM PTO-475 (Past 1202) *U.S. Covernment Priving Office: 2003—109-166/70011 Patient and Trademark Office, U.S. DEPARTMENT OF COMMERCE											

Application or Docket Number